



RECEIVED

JUDICIAL FINANCIAL DISCLOSURE STATEMENT FOR YEAR ENDING ON ETHICS

DECEMBER 31, 2008

## **GENERAL INFORMATION**

Nam	ne HON. ALLA	N R. EARL						
Title	Title District Court Judge - Dept. XIX							
Mail	Regional Justice Center Mailing address 200 Lewis Ave., Dept. XIX							
,,,,,,,	Las Vegas, Nevada 89155							
Leng	Length of residence in Nevada 1945 to present							
Cou	County in which you are registered to vote Clark County							
Length of residence in the county in which you are registered to vote <u>Since 1945</u>								
	COMP	ENSATION FOR EX	TRA-JUDIO	CIAL ACTIVIT	<u> FIES</u>			
name	Disclose the date, place, and nature of any extra-judicial activity for which you received compensation, the name of the payor, and the amount of the compensation so received. <i>See</i> Canon 4I(2)(a)(ii). Attach additional sheets if necessary.							
sheet	ts if necessary.							
sheet	ts if necessary.  Date	Nature and Place o	of Activity	Name of Payo	r	Amount		
sheet N/A	Date	Nature and Place o	of Activity	Name of Payo	r	Amount		
	Date	Nature and Place o	of Activity	Name of Payo	r	Amount		
	Date	Nature and Place o	of Activity	Name of Payo	<i>r</i>	Amount		
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	Date	Nature and Place o	of Activity	Name of Payo	r	Amount		
	Date			Name of Payo	r	Amount		
	Date		COME	Name of Payo	r	Amount		
N/A Disclage o	Date  A  lose each source of or older. No listing the should be disclosed.	INC  income received by you a g of individual clients, custonsed under a general heading	COME  nd by each men omers, or patien	nber of your housel ts is required. Inco	hold who i	s 18 years of ed from such		
N/A Disclage o	Date  A  lose each source of or older. No listing	INC  income received by you a g of individual clients, custo osed under a general headin if necessary.	COME  nd by each men omers, or patien	nber of your housel ts is required. Inco	hold who iome receiv	s 18 years of ed from such		
Disclage o sourc Attac	Date  A  lose each source of or older. No listing the should be disclosed additional sheets	INC  income received by you a g of individual clients, custo osed under a general headin if necessary.	nd by each menomers, or patien	nber of your housel ts is required. Inco essional services."	hold who iome receiv	s 18 years of ed from such a 4I(2)(a)(iii).		
Disclage o sourc Attac	Date  A  A  Iose each source of or older. No listing the should be disclosed additional sheets  Source of the of Nevada	INC  income received by you a g of individual clients, custo osed under a general headin if necessary.	nd by each menomers, or patien	nber of your housel ts is required. Inco essional services." Recipient EARL, Judge,	hold who iome receiv	s 18 years of ed from such a 4I(2)(a)(iii).		
Disclage o sourc Attac	Date  A  A  Iose each source of or older. No listing the should be disclosed additional sheets  Source of the of Nevada	INC  fincome received by you a g of individual clients, custo bed under a general headin if necessary.  fincome  -Savings/Checking	nd by each men omers, or patien as "profe	nber of your housel ts is required. Inco essional services." Recipient EARL, Judge,	hold who iome receiv	s 18 years of ed from such a 4I(2)(a)(iii).		

## REAL PROPERTY

	are required – list the street address proved vacant land, agricultural landadditional sheets if necessary.  Specific Location	d. commercial building, apartments, si  Nature/Particular Use	ingle-family, rental, etc. Attac
	N/A		The Controlact
		CDEDITORS	
		<u>CREDITORS</u>	
	equestion 9 above, or (b) the debt is or retained by the seller or its assignee or	whom you or a member of your househo or deed of trust on real property which i he for which a security interest in a mot designee. See Canon 4I(2)(a)(v). Attach	s not required to be listed unde or vehicle for personal use was a additional sheets if necessary.
	question 9 above, or (b) the debt is or	tice the formula of the security interest in a mot designee. See Canon 4I(2)(a)(v). Attack	s not required to be listed unde
-	question 9 above, or (b) the debt is or retained by the seller or its assignee or Name of Creditor  Clark County Treasurer's Off Debt incurred as a Semi-Annu Special Assessment upon the purchase of our home.	tice the formula of the security interest in a mot designee. See Canon 4I(2)(a)(v). Attack	s not required to be listed under or vehicle for personal use was a additional sheets if necessary. Name of Debtor
I to	question 9 above, or (b) the debt is or retained by the seller or its assignee or Name of Creditor  Clark County Treasurer's Off Debt incurred as a Semi-Annu Special Assessment upon the purchase of our home.  But ist each business entity in which you or cust, director, officer, owner (in whole cocurity representing one percent or monity. See Canon 41(2)(a)(vi). Attach a	USINESS ENTITIES  r a member of your household is involve or in part), limited or general partner, or one of the total outstanding stock or sec dditional sheets if necessary.	s not required to be listed under or vehicle for personal use was additional sheets if necessary.  Name of Debtor  and DENISE EARL
I ti	question 9 above, or (b) the debt is or retained by the seller or its assignee or Name of Creditor  Clark County Treasurer's Off Debt incurred as a Semi-Annu Special Assessment upon the purchase of our home.  Business Entity  In Montage of Semi-Annu Special Assessment upon the purchase of our home.	USINESS ENTITIES  r a member of your household is involve or in part), limited or general partner, or the total outstanding steel.	s not required to be listed unde or vehicle for personal use was additional sheets if necessary.  Name of Debtor  and DENISE EARL
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## GIFTS, BEQUESTS, FAVORS, OR LOANS

2.	Disclose the date, place, name of the donor, amount, and nature of any gift, bequest, favor or loan to you a member of your family residing in your household if its value exceeded \$200, unless this disclosure i required by Section 4D of the Code of Judicial Conduct. See especially Canon 4D(5)(h) and 4I(2)(a) Attach additional sheets if necessary.					
	Date	Name and Place of Gift	Name of Donor	Amount		
	May 7-8-9, 2008	Disneyland Hotel Anaheim, California	Westcoast Casualty	Approx. \$725.00		
		am in Anaheim, California ransportation to and from t				
	I HEREBY CERTIFY THAT T	HE INFORMATION CONTAINED IN TH	IS DOCUMENT IS TRUE AND COMP	LETE.		
	March 16, 2009  Date	ALLAN R. EARL,	Signature Signature			

DISTRICT COURT JUDGE - DEPT. XIX

File this form with the State Court Administrator.

Deliver or mail to:

State Court Administrator Administrative Office of the Courts 201 S. Carson Street, Suite 250 Carson City, Nevada 89701-4702

Telephone: (775) 684-1700